Form 45-106F1 Report of Exempt Distribution

| ITEM 1 - REPORT TYPE | | | | | | | | |
|--|---|--|--|--|--|--|--|--|
| New report | | | | | | | | |
| Amended report If amended, provide filing date of report that is being amended 2023 06 09 (YYYY-MM-DD) | | | | | | | | |
| ITEM 2 - PARTY CERTIFYING T | HE REPORT | | | | | | | |
| Indicate the party certifying the report (select only one). For guidance regarding whether an issuer is an investment fund, refer to section 1.1 of National Instrument 81-106 Investment Fund Continuous Disclosure and the companion policy to NI 81-106. | | | | | | | | |
| Investment fund issuer | | | | | | | | |
| ✓ Issuer (other than an inv | estment fund) | | | | | | | |
| | | | | | | | | |
| Item 3 - Issuer Name and (| THER IDENTIFIERS | | | | | | | |
| Provide the following information about | the issuer, or if the issuer is an investment fund, about the fund. | | | | | | | |
| Full legal nar | e Big Gold Inc. | | | | | | | |
| Previous full legal nar | e | | | | | | | |
| If the issuer's name changed in | the last 12 months, provide most recent previous legal name. | | | | | | | |
| Webs | e (if applicable) | | | | | | | |
| If the issuer has a legal entity identifier | provide below. Refer to Part B of the Instructions for the definition of "legal entity identifier". | | | | | | | |
| Legal entity identifi | r | | | | | | | |
| If two or more issuers distributed a sing | e security, provide the full legal name(s) of the co-issuer(s) other than the issuer named above. | | | | | | | |
| Full legal name(s) of co-issuer | (if applicable) | | | | | | | |
| ITEM 4 - UNDERWRITER INFO | IMATION | | | | | | | |
| | t, provide the underwriter's full legal name and firm NRD number. | | | | | | | |
| Full legal name | | | | | | | | |
| Firm NRD number | (if applicable) | | | | | | | |
| If the underwriter does not have a firm | IRD number, provide the head office contact information of the underwriter. | | | | | | | |
| Street address | | | | | | | | |
| Municipality | Province/State | | | | | | | |
| Country | Postal code/Zip code | | | | | | | |
| Telephone number | Website (if applicable) | | | | | | | |

| ITEM 5 - ISSUER INFORMATION |
|---|
| If the issuer is an investment fund, do not complete Item 5. Proceed to Item 6. |
| a) Primary industry |
| Provide the issuer's North American Industry Classification Standard (NAICS) code (6 digits only) that in your reasonable judgment most closely corresponds to the issuer's primary business activity. |
| NAICS industry code 2 1 2 2 0 |
| If the issuer is in the mining industry , indicate the stage of operations. This does not apply to issuers that provide services to issuers operating in the mining industry. Select the category that best describes the issuer's stage of operations. |
| Exploration Development Production |
| Is the issuer's primary business to invest all or substantially all of its assets in any of the following? If yes, select all that apply. |
| Mortgages Real estate Commercial/business debt Consumer debt Private companies |
| Cryptoassets |
| b) Number of employees |
| Number of employees: 🗹 0 - 49 🗌 50 - 99 🗌 100 - 499 🗌 500 or more |
| c) SEDAR profile number |
| Does the issuer have a SEDAR profile? |
| No Ves If yes, provide SEDAR profile number 0 0 0 4 5 0 9 8 |
| If the issuer does not have SEDAR profile complete item 5(d) - (h). |
| d) Head office address |
| Street address Province/State |
| Municipality Postal code/Zip code |
| Country Telephone number |
| e) Date of formation and financial year-end |
| Date of formation Financial year-end |
| YYYY MM DD MM DD |
| f) Reporting issuer status |
| Is the issuer a reporting issuer in any jurisdication of Canada? No Yes |
| If yes, select the jurisdictions of Canada in which the issuer is a reporting issuer. |
| AII AB BC MB NB NL NT |
| NS NU ON PE QC SK YT |
| g) Public listing status |
| If the issuer has a CUSIP number, provide below (first 6 digits only) |
| CUSIP number |
| If the issuer is publicly listed, provide the name of the exchange on which the issuer's equity securities primarily trade. Provide only the name of an exchange and not a trading facility such as, for example, an automated trading system. |
| Exchange name |
| h) Size of issuer's assets |
| Select the size of the issuer's assets based on its most recently available annual financial statements (Canadian \$). If the issuer has not prepared annual financial statements for its first financial year, provide the size of the issuer's assets at the distribution end date. |

| \$0 to under \$5M | \$5M to under \$25M | □ \$25M to under \$100M |
|-----------------------|---------------------|-------------------------|
| S100M to under \$500M | S500M to under \$1B | S1B or over |

| If the issue is an investment fund, provide the following information: a) Investment fund manager information Full legal name Furn NRD number If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State Guntry Postal code/Zip code Telephone number D Type of investment fund Tree of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most accurately identifies the issuer (select only one). Indicate whether one or both of the following apply to the investment fund. Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment fund issuers Is a UCIT's Fund' 'understaining for the Collective Investment of Transferable Securities funds (UCIT's Funds) are investment funds regulated by the European Union (C) Date of formation and financial year-end of the investment fund Suppresent fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund a reporting issuer in any jurisdication of Canada? No Yes It he investment fund hars a CUSP number, provide below (first 6 digits only) CUSP number On O Public listing status of the investment fund is a reporting issuer. All All All </th |
|---|
| Full legal name |
| Firm NRD number (if applicable) If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality Province/State |
| If the investment fund manager does not have a firm NRD number, provide the head office contact information of the investment fund manager. Street address Municipality County Postal code/Zip code County Telephone number Postal code/Zip code Do Type of investment fund Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Do Type of investment fund that most accurately identifies the issuer (select only one). Do Money market De Quity De County De C |
| Street address Municipality Country Postal code/Zip code Telephone number Website (if applicable) b Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Investment fund that most mestment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive and objective Investment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive and objective Investment fund issuers Is a UCITS Fund' Undertaking for the Collective Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directive Investment fund issuers Is a UCITS Fund' Under the investment fund issuers Is a UCITS Fund' VYYY MM DD Indicate whether one or both of the investment fund Is a UCITS Fund' Is a UCITS Fund' VYYY MM DD Is a not objective Investment fund Is a UCITS Funds Is a UCITS Fund' VYYY MM DD Is a not objective Investment fund Is a not objective Investment fund is a reporting issuer. Is a NB NB NC NC NC Is a ND ON ON PE QC |
| Municipality Province/State Country Postal code/Zip code Telephone number Website (if applicable) b) Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Anternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Is a UCITS Fund' 'Undertaking for the Collective Investment fund issuers Is a UCITS Fund' 'Undertaking for the Collective Investment of Transferable Securities funds (UCITS Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. c) Date of formation and financial year-end of the investment fund b the investment fund a reporting issuer status of the investment fund c) Date of formation c) Date of formation c) No c) Paste of canada in which the investment fund is a reporting issuer. a All b BC b MB b NL c) NT c) Public listing status of the investment fund is a ceporting issuer. c) Public listing status of the investment fund is a ceporting issuer. a All a AB b C b MB b NL in T c) Public listing status of the investment fund c) Different fund has a CUSIP number c) Public listing status of the investment fund is digits only: c) Different fund is a publicly listed, provide the name of the exchange on which the investment fund is securities primarily trade. Provide only the fully index provide the name of the exchange on which the investment fund is securities primarily trade. Provide only the fully index provide the |
| Country Postal code/Zip code Telephone number Website (if applicable) b) Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Alternative strategies Cryptoasset Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Is a UCITs Fund* 'Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment of the investment fund O bate of formation and financial year-end of the investment fund Security MM DD Financial year-end MM DD O Reporting issuer status of the investment fund Is in investment fund a reporting issuer in any jurisdication of Canada? No YYYY MM DD No Yes If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All |
| Telephone number Website (if applicable) Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Indicate with the root or both of the Equity Indicate whether one or both of the following apply to the investment fund. Indicate whether one or both of the following apply to the investment fund. Indicate whether one or both of the following apply to the investment fund. Indicate whether one or both of the following apply to the investment fund. Indicate whether one or both of the following apply to the investment fund. Indicate whether one or both of the following apply to the investment fund. Indicate whether one or both of the following apply to the investment fund. Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment of the investment fund Undertaking for the Collective investment of the investment fund Date of formation and financial year-end of the investment fund Date of formation and financial year-end of the investment fund Security MM DD Financial year-end MM DD MM DD MM DD Key, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All All All AB BC MB NB NL NT O Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number CUSIP number, provide below (first 6 digits only) CUSIP number, provide below (first 6 digits only) Indication of the investment fund If the investment fund is publicly listed, provide the name of the exchange on which the i |
| b) Type of investment fund Type of investment fund that most accurately identifies the issuer (select only one). Money market Equity Alternative strategies Cryptoasset Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Is a UCITs Fund ¹ 'Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. c) Date of formation |
| Type of investment fund that most accurately identifies the issuer (select only one). Money market Equity Fixed income Alternative strategies Cryptoasset Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Is a UCITs Fund* ''Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. c) Date of formation Date of formation YYYY MM DD (Intervention function and financial year-end of Canada? No YYYY MM DD MM DD MD Class of Canada in which the investment fund is a reporting issuer. All All AB BC MB NB NL NT Public listing status of the investment fund If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. ON PE QC SK YT </td |
| Money market Equity Fixed income Balanced Alternative strategies Cryptoasset Other (describe) |
| Alternative strategies Cryptoasset Other (describe) Indicate whether one or both of the following apply to the investment fund. Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Is a UCITs Fund ¹ 'Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. c) Date of formation and financial year-end of the investment fund Date of formation and financial year-end of the investment fund Is the investment fund a reporting issuer status of the investment fund is a reporting issuer. If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All AB BC MB MB NB NL NT NS NU ON PE QC SK YT e) Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number |
| Indicate whether one or both of the following apply to the investment fund. Invests primarily in other investment fund issuers Is a UCITs Fund ¹ Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. c) Date of formation and financial year-end of the investment fund Date of formation and financial year-end of the investment fund d) Reporting issuer status of the investment fund Is the investment fund a reporting issuer in any jurisdication of Canada? No Yes If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All AB BC BC MB NB NL NT PE QC SK YT If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| Invests primarily in other investment fund issuers Is a UCITs Fund ¹ "Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. c) Date of formation and financial year-end of the investment fund Date of formation and financial year-end of the investment fund Date of formation and financial year-end of the investment fund Bate of formation and financial year-end of the investment fund d) Reporting issuer status of the investment fund Is the investment fund a reporting issuer in any jurisdication of Canada? No Yes If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All All AB BC MB NB NL NT Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number If yes, securities primarily trade, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| Is a UCITs Fund 'Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. c) Date of formation and financial year-end of the investment fund Date of formation and financial year-end of the investment fund Date of formation Pate of formation YYYY MM DD Financial year-end MM DD d) Reporting issuer status of the investment fund Is the investment fund a reporting issuer in any jurisdication of Canada? No Yes If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All All AB NS NS NS ND Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number, provide below (first 6 digits only) If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| ''Undertaking for the Collective Investment of Transferable Securities funds (UCITs Funds) are investment funds regulated by the European Union (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. c) Date of formation and financial year-end of the investment fund Date of formation and financial year-end of the investment fund 0 Reporting issuer status of the investment fund Is the investment fund a reporting issuer in any jurisdication of Canada? No If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All AB NS NU ON PE QC SK YT e) Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number |
| (EU) directives that allow collective investment schemes to operate throughout the EU on a passport basis on authorization from one member state. c) Date of formation and financial year-end of the investment fund Date of formation and financial year-end of the investment fund Date of formation YYYY MM MM DD d) Reporting issuer status of the investment fund Is the investment fund a reporting issuer in any jurisdication of Canada? No If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All AB NS NU ON PE QC SK YT e) Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| Date of formation Financial year-end YYYY MM Financial year-end MM MM DD MM DD MM Pes MB |
| d) Reporting issuer status of the investment fund Is the investment fund a reporting issuer in any jurisdication of Canada? No Yes If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All AB BC MB NB NL NS NU ON PE QC SK YT If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| d) Reporting issuer status of the investment fund Is the investment fund a reporting issuer in any jurisdication of Canada? Is the investment fund a reporting issuer in any jurisdication of Canada? No If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All AB NS NU ON PE QC SK If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| Is the investment fund a reporting issuer in any jurisdication of Canada? No Yes If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. All AB BC MB NB NL NT NS NU ON PE QC SK YT e) Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| If yes, select the jurisdictions of Canada in which the investment fund is a reporting issuer. Image: All AB BC MB NB NL NT NS NU ON PE QC SK YT e) Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| All AB BC MB NB NL NT NS NU ON PE QC SK YT e) Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| e) Public listing status of the investment fund If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| If the investment fund has a CUSIP number, provide below (first 6 digits only) CUSIP number If the investment fund is publicly listed, provide the name of the exchange on which the investment fund's securities primarily trade. Provide only the |
| CUSIP number |
| |
| name of an exchange and not a trading facility such as, for example, an automated trading system |
| |
| Exchange name |
| f) Net asset value (NAV) of the investment fund |
| Select the NAV range of the investment fund as of the date of the most recent NAV calculation (Canadian \$). |
| L L \$\the under \$\mathbf{S}M \qquad L \qquad \mathbf{S}M \text{ to under \$\mathbf{S}M \qquad \text{ to under \$\mathbf{S}M \qquad \text{to under \$\mathbf{S}M |
| \$0 to under \$5M \$5M to under \$25M \$25M to under \$100M \$100M to under \$500M \$500M to under \$1B \$1B or over Date of NAV calculation: |

ITEM 7 - INFORMATION ABOUT THE DISTRIBUTION If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include in Item 7 and Schedule 1 information about

| purchasers resident in that jurisdi | ada completes a distribution in a ju ction of Canada only. Do not inclua which must be disclosed in Item 8. 1 | le in Item 7 securities iss | ued as payment o | of commissions or f | inder's fees in | | |
|--|---|--|---|---|-------------------------------------|--|--|
| a) Currency | | | | | | | |
| Select the currency or currencies | in which the distribution was made. | All dollar amounts prov | ided in the report | must be in Canadi | ian dollars. | | |
| ✓ Canadian dollar | US dollar | Other (descri | ibe) | | | | |
| b) Distribution date(s) | | | | | | | |
| State the distribution start and end dates. If the report is being filed for securities distributed on only one distribution date, provide the distri as both the start and end dates. If the report is being filed for securities distributed on a continuous basis, include the start and end dates for distribution period covered by the report. | | | | | | | |
| Start da | ^{te} 2023 05 30 | End c | late 2023 | 06 06 | | | |
| | YYYY MM DD | | YYYY | MM DD | | | |
| c) Detailed purchaser info | rmation | | | | | | |
| Complete Schedule 1 of thi | s form for each purchaser and | d attach the schedul | e to the compl | eted report. | | | |
| d) Types of securities distr | ributed | | | | | | |
| | n for all distributions reported on a p SIP number, indicate the full 9-digit | | | | now to indicate the | | |
| | | | | Canadian \$ | 5 | | |
| Security CUSIP number (if applicable) | Description of security | Number of securities | Single or lowest price | Highest price | Total amount | | |
| UBS 68278R sha | h Unit consist of 1 common re and 1 common share chase warrant. | 12,514,000. | 00 0.050 | 0 | 625,700.00 | | |
| | ommon Flow-Through Share | e 1,571,500.0 | 00 0.070 | 0 | 110,005.00 | | |
| e) Details of rights and cor | nvertible/exchangeable securiti | es | | | <u></u> | | |
| were distributed, provide the con | ns) were distributed, provide the exe wersion ratio and describe any othe | | | | exchangeable securities | | |
| Convertible / exchangeable Underlying security code security code | Exercise price (Canadian \$) | Expiry date (YYYY- MM-DD) | Conversion ratio | Describe other items (if applicable) | | | |
| W N T C M S | Lowest Highest 0.0800 | 2024-11-30 | | Warrants are for 18 Months Expiring on November 30, 2024 and December 6, 2024 | | | |
| f) Summary of the distribut | tion by jurisdiction and exempti | ion | | | | | |
| purchaser resides and for each ex distribution in a jurisdiction of Co This table requires a separate line purchaser resides, if a purchaser jurisdiction. | recurities distributed and the number remption relied on in Canada for the anada, include distributions to purch e item for: (i) each jurisdiction where resides in a jurisdiction of Canada, o tate the province or territory, othere | at distribution. However, nasers resident in that ju e a purchaser resides, (ii) and (iii) each exemption | if an issuer locate risdiction of Cana each exemption | ed outside of Cana da only. relied on in the juri | da completes a isdiction where a | | |
| Province or country | Exemption relie | ed on | Number of unique purchasers | | mount (Canadian \$) | | |
| British Columbia | NI 45-106 2.3 [Accredited i | nvestor] | | 11 | 275,000.00 | | |
| Ontario | NI 45-106 2.3 [Accredited i | nvestor] | | 11 | 325,705.00 | | |
| Ontario | NI 45-106 2.5 [Family, frier associates] | nds and business | | 1 | 5,000.00 | | |
| Québec | NI 45-106 2.3 [Accredited i | nvestor] | | 2 | 50,000.00 | | |
| Alberta | NI 45-106 2.3 [Accredited i | nvestor] | | 1 | 50,000.00 | | |
| L | 1 | | | I | | | |

| Costa Rica | NI 45-106 2.3 [Accredited investor] | 1 | 20,000.00 |
|------------|-------------------------------------|-----------------------|------------|
| Australia | NI 45-106 2.3 [Accredited investor] | 1 | 10,000.00 |
| | | | |
| | Total dollar amount of se | ecurities distributed | 735,705.00 |

^{2a} In calculating the number of unique purchasers per row, count each purchaser only once. Joint purchasers may be counted as one purchaser.

^{2b} In calculating the total number of unique purchasers to which the issuer distributed securities, count each purchaser only once, regardless of whether the issuer distributed multiple types of securities to, and relied on multiple exemptions for, that purchaser.

g) Net proceeds to the investment fund by jurisdiction

If the issuer is an investment fund, provide the net proceeds to the investment fund for each jurisdiction of Canada and foreign jurisdiction where a purchaser resides.³ If an issuer located outside of Canada completes a distribution in a jurisdiction of Canada, include net proceeds for that jurisdiction of Canada only. For jurisdictions within Canada, state the province or territory, otherwise state the country.

| Province or country | Net proceeds (Canadian \$) |
|---|-------------------------------|
| | |
| Total net proceeds to the investment fund | |

³"Net proceeds" means the gross proceeds realized in the jurisdiction from the distributions for which the report is being filed, less the gross redemptions that occurred during the distribution period covered by the report.

h) Offering materials - This section applies only in Saskatchewan, Ontario, Québec, New Brunswick and Nova Scotia.

If a distribution has occurred in Saskatchewan, Ontario, Québec, New Brunswick or Nova Scotia, complete the table below by listing the offering materials that are required under the prospectus exemption relied on to be filed with or delivered to the securities regulatory authority or regulator in those jurisdictions.

In Ontario, if the offering materials listed in the table are required to be filed with or delivered to the Ontario Securities Commission (OSC), attach an electronic version of the offering materials that have not been previously filed with or delivered to the OSC.

| Description | Date of document or other material (YYYY-MM-DD) | Previously filed with or delivered to regulator? (Y/N) | Date previously filed or delivered (YYYY-MM-DD) |
|-------------|---|---|---|
| | | | |

| ITEM 8 - COMPENSATION | NFORMATION |
|-----------------------|------------|
|-----------------------|------------|

| Provide information for each person (as defined in NI 45-106) to whom the issuer directly provides, or will provide, any compensation in connection with the distribution. Complete additional copies of this page if more than one person was, or will be, compensated. | | | | | | | |
|---|--------------------|---|---|--|--|--|--|
| Indicate whethe | er any compensatio | n was paid, or will be paid, in connection with the distribution. | | | | | |
| 🗌 No | ✓ Yes | If yes, indicate number of persons compensated. | 8 | | | | |

| a) Name of person comper | nsated and registra | ation status | | | | | | | |
|--|--|---------------------|----------------------------|--------------|-------------|--------------|--------------|---------------|--------------|
| Indicate whether the person comp | pensated is a registrar | ot. | 🗌 No | \checkmark | Yes | | | | |
| If the person compensated is an individual, provide the name of the individual. | | | | | | | | | |
| Full legal name of individ | ual | | | | | | | | |
| | Far | nily name | Fi | rst given n | ame | | Secon | dary given na | ames |
| If the person compensated is not o | an individual, provide | the following info | rmation. | | | | | | |
| Full legal name of non-individual PI Financial Corp./Corporation Financière PI | | | | | | | | | |
| Firm NRD number 5 2 9 0 (if applicable) | | | | | | | | | |
| Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. | | | | | | | | | |
| b) Business contact inform | ation | | | | | | | | |
| If a firm NRD number is not provi | ded in Item 8 (a), pro | vide the business o | contact information | on of the p | person be | eing comp | ensated. | | |
| Street address | | | | | | | | | |
| Municipality | | | | Р | rovince | /State | | | |
| Country | | | | Postal c | code/Zip | code | | | |
| Email address | | | | Telep | hone nu | umber | | | |
| c) Relationship to issuer or | investment fund n | nanager | | | | L | | | |
| Indicate the person's relationship the Instructions and the meaning | | | | | | | ing of "con | nected" in F | Part B(2) of |
| Connect with the issuer | | | | | - | | r than an ii | nvestment f | (und) |
| | | - | | | | | | | |
| Director or officer of the | investment fund or i | nvestment fund m | anager | Employ | ee of the | e issuer or | investmer | nt fund man | ager |
| ✓ None of the above | ✓ None of the above | | | | | | | | |
| d) Compensation details | | | | | | | | | |
| Provide details of all compensation Canadian dollars. Include cash cor | | | | | | | | | |
| incidental to the distribution, such | as clerical, printing, l | egal or accounting | g services. An issu | er is not r | required t | to ask for d | | | |
| allocation arrangements with the Cash commissions paid | | | -individual comp | ensated b | by the issi | uer. | | | |
| | 5,600 | .00 | | _ | Security of | T 1 | Security coc | le 2 Secu | rity code 3 |
| Value of all securities distributed as compensation ⁴ | | | Security codes | | WN | T | | | |
| Describe ter | ms of warrants, optio | ns or other rights | 112,000 War Exercisable | | | nths, Exp | biring Nov | /ember 30 | , 2024, |
| Other compensation ⁵ | | Describe | | | | | | | |
| Total compensation paid | 5,600. | 00 | | | | | | | |
| Check box if the pers | on will or may receive | e any deferred co | mpensation (des | cribe the | terms be | elow) | | | |
| | | | | | | | | | |
| ⁴ Provide the aggregate value of a additional securities of the issuen rights exercisable to acquire ado ⁵ Do not include deferred comper | r. Indicate the securit litional securities of th | y codes for all sec | | | | | | | |

| a) Name of person comp | ensated and regis | tration | status | | | | | | | |
|--|--|----------------------|---------------------------|-----------------|--------------------------|-------------------|-----------------------|---------------------|-------------------------|---|
| Indicate whether the person co | mpensated is a regist | rant. | | | No | | \checkmark | Yes | | |
| If the person compensated is an | n individual, provide t | he nam | e of the ind | lividu | ıal. | | | | | |
| Full legal name of indiv | vidual | | | | | | | | | |
| | Family name First given name Secondary given names | | | | | | | | Secondary given names | |
| If the person compensated is no | ot an individual, prov | ide the f | following in | form | ation. | | | | | |
| Full legal name of non-individual INTRYNSYC CAPITAL CORPORATION | | | | | | | | | | |
| Firm NRD number3080(if applicable) | | | | | | | | | | |
| Indicate whether the person co | mpensated facilitated | the dis | tribution th | rougl | h a fundi | ng por | tal or ar | n interne | et-based p | portal. 🖌 No 🗌 Yes |
| b) Business contact info | mation | | | | | | | | | |
| If a firm NRD number is not pro | ovided in Item 8 (a), p | orovide t | the business | s con | tact infor | matior | n of the | person l | being con | npensated. |
| Street address | | | | | | | | | | |
| Municipality | | | | | | | P | rovince | e/State | |
| Country | | | | | | F | Postal o | code/Zi | p code | |
| Email address | | | | | | | Telep | hone n | umber | |
| c) Relationship to issuer | or investment fund | d mana | ager | | | | | | | |
| the Instructions and the meaning | ng of "control" in sect | ion 1.4 | of NI 45-10 | | | | f comple | eting thi | s section. | aning of "connected" in Part B(2) of |
| Connect with the issu | ier or investment fun | d mana | ger | | | | Insider | of the is | ssuer (otr | ner than an investment fund) |
| Director or officer of t | he investment fund o | or invest | tment fund | man | ager | | Employ | vee of th | e issuer | or investment fund manager |
| ✓ None of the above | | | | | | | | | | |
| d) Compensation details | | | | | | | | | | |
| Canadian dollars. Include cash o | commissions, securitie ch as clerical, printin | es-based g, legal | d compensa or accounti | ition, ng se | gifts, dis ervices. A | counts n issue | or othe r is not i | r compe required | nsation. I to ask fo | tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal |
| Cash commissions pa | aid 17,70 | 60.00 | - | | | | Г | Security | code 1 | Security code 2 Security code 3 |
| Value of all securitie distributed as compensatio | | | | Se | ecurity co | des | | W N | | |
| Describe terms of warrants, options or other rights Describe terms of warrants, options or other rights Exercisable @ \$0.08 56,000 Warrants for 18 Months, Expiring December 6 2024, Exercisable @ \$0.08 | | | | | | | | | | |
| Other compensatio | n ⁵ | | Describ | e | | | | | | |
| Total compensation pa | id 17,76 | 60.00 | | | | | | | | |
| Check box if the pe | erson will or may rece | eive any | v deferred c | omp | ensation | (desc | ribe the | terms b | elow) | |
| ⁴ Provide the aggregate value of additional securities of the iso rights exercisable to acquire a ⁵ Do not include deferred comp | uer. Indicate the secu dditional securities o | irity cod | les for all s | | | | | | | |

| a) Name of person compensated | and registra | ation status | | | | | | | | | | |
|---|--|---|------------------------------|------------------------------|------------------------------|----------------------------------|----------------------|--|--------------|--------------------|-----------------------|------------|
| Indicate whether the person compensated | d is a registrar | nt. | | 🗌 No | | \checkmark | Yes | | | | | |
| If the person compensated is an individuo | al, provide the | name of the i | ndivid | ual. | | | | | | | | |
| Full legal name of individual | | | | | | | | | | | | |
| | Far | nily name | | | First | t given n | ame | | Seco | ndary g | iven nam | ies |
| If the person compensated is not an indiv | If the person compensated is not an individual, provide the following information. | | | | | | | | | | | |
| Full legal name of non-individual RESEARCH CAPITAL CORPORATION / CORPORATION RECHERCHE CAPITAL | | | | | | | | | | | | |
| Firm NRD number 3 0 7 0 (if applicable) | | | | | | | | | | | | |
| Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. | | | | | | | | | | | | |
| b) Business contact information | | | | | | | | | | | | |
| If a firm NRD number is not provided in I | tem 8 (a), pro | vide the busin | ess coi | ntact infor | mation | of the | person b | eing con | npensated. | | | |
| Street address | | | | | | | | | | | | |
| Municipality | | | | | | Р | rovince | e/State | | | | |
| Country | | | | | Ρ | ostal c | ode/Zi | p code | | | | |
| Email address | | | | | | Telep | hone n | umber | | | | |
| c) Relationship to issuer or investment fund manager | | | | | | | | | | | | |
| Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager None of the above | | | | | | | | | | | | |
| d) Compensation details | | | | | | | | | | | | |
| Provide details of all compensation paid, Canadian dollars. Include cash commission incidental to the distribution, such as cleric allocation arrangements with the director Cash commissions paid Value of all securities distributed as compensation ⁴ | ns, securities- cal, printing, l | based compen egal or accour mployees of a | nsation nting s non-ii | n, gifts, dis services. A | counts n issuer comper | or other is not r nsated b | r compei required | nsation. to ask fo suer. code 1 | Do not repoi | rt payn out, or | nents for report o | r services |
| Describe terms of warrants, options or other rights 40,000 Warrants for 18 Months, Expiring November 30, 2024, Exercisable @ \$0.08 8,000 Warrants for 18 Months, Expiring December 6, 2024, Exercisable @ \$0.08 | | | | | | | | | | | | |
| Other compensation ⁵ | | Desc | ribe | | | | | | | | | |
| Total compensation paid | 2,400. | 00 | | | | | | | | | | |
| Check box if the person will o | or may receive | e any deferred | d com | pensation | (descr | ibe the | terms b | elow) | | | | |
| ⁴ Provide the aggregate value of all secund additional securities of the issuer. Indicative rights exercisable to acquire additional security of the secur | nte the securit | y codes for all | | | | | | | | | | |

| a) Name of person compensated | and registrati | on status | | | | | | | | |
|---|--|--------------------------------------|---|------------------------------|---|-----------------------------------|--------------------------------------|--|--|--|
| Indicate whether the person compensate | ed is a registrant. | | No No | \checkmark | Yes | | | | | |
| If the person compensated is an individu | al, provide the n | ame of the indivi | dual. | | | | | | | |
| Full legal name of individual | | | | | | | | | | |
| | Famil | y name | Fi | irst given na | ame | Secon | dary given names | | | |
| If the person compensated is not an indi | If the person compensated is not an individual, provide the following information. | | | | | | | | | |
| Full legal name of non-individual ACCILENT CAPITAL MANAGEMENT INC. | | | | | | | | | | |
| Firm NRI | 0 number 1 | 2 4 | 1 0 | | (if ap | plicable) | | | | |
| Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves | | | | | | | | | | |
| b) Business contact information | | | | | | | | | | |
| If a firm NRD number is not provided in | Item 8 (a), provid | le the business c | ontact informati | on of the p | erson being co | mpensated. | | | | |
| Street address | | | | | | | | | | |
| Municipality | | | | Pr | ovince/State | | | | | |
| Country | | | | Postal co | ode/Zip code | | | | | |
| Email address | | |] | Teleph | none number | | | | | |
| c) Relationship to issuer or investment fund manager | | | | | | | | | | |
| Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. | | | | | | | | | | |
| Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) | | | | | | | | | | |
| Director or officer of the investment fund or investment fund manager | | | | | | | | | | |
| \checkmark None of the above | | | • | | | | J. | | | |
| d) Compensation details | | | | | | | | | | |
| Provide details of all compensation paid, Canadian dollars. Include cash commissi incidental to the distribution, such as clea allocation arrangements with the directo | ons, securities-ba ical, printing, leg | sed compensation al or accounting | on, gifts, discount services. An issu | ts or other Ier is not re | compensation. equired to ask f | Do not report | payments for services | | | |
| Cash commissions paid | 6,000.4 | 0 | | S | Security code 1 | Security cod | e 2 Security code 3 | | | |
| Value of all securities distributed as compensation ⁴ | | | Security codes | V | W N T | | | | | |
| Describe terms of | warrants, options | or other rights | 85,720 Warr Exercisable | | 8 Months, E | xpiring Nove | mber 30, 2024, | | | |
| Other compensation ⁵ | | Describe | | - • | | | | | | |
| Total compensation paid | 6,000.4 | 2 | | | | | | | | |
| Check box if the person will | or may receive a | ⊐ any deferred cor | npensation (des | cribe the t | erms below) | | | | | |
| | | | | | | | | | | |
| ⁴ Provide the aggregate value of all sec additional securities of the issuer. Indic rights exercisable to acquire additional ⁵ Do not include deferred compensation | ate the security of securities of the | codes for all sec | on, <u>excluding</u> op urities distribute | ntions, wan d as comp | rants or other i pensation, <u>inclu</u> | rights exercisa Iding options, | able to acquire warrants or other | | | |

| a) Name of person compe | ensated and regis | tration | status | | | | | | | | | |
|---|--|------------------------|--------------------------------|--------------------------------|--------------------------|--------------------------------|-------------------|--------------------------|-------------|-------------|----------------|---|
| Indicate whether the person con | npensated is a regist | rant. | | 🗌 No | | \checkmark | Yes | | | | | |
| If the person compensated is an | individual, provide t | he name | e of the indivi | dual. | | | | | | | | |
| Full legal name of indivi | dual | | | | | | | | | | |] |
| | | Family na | ime | • | First g | jiven na | ame | | Seco | ndary given | names | 1 |
| If the person compensated is not | - | | - | | | | | | | | | |
| Full legal name | of non-individual | LEEDE | E JONES G | ABLE INC |). | | | | | | | |
| Fi | rm NRD number | 5 | 7 7 | 0 | | | | (if appl | icable) | | | |
| Indicate whether the person con | npensated facilitatea | the dist | ribution throu | ıgh a fundiı | ng portal | or an | internet | t-based p | ortal. | ✓ N | o 🗌 Yes | |
| b) Business contact inform | mation | | | | | | | | | | | |
| If a firm NRD number is not pro | vided in Item 8 (a), p | orovide tl | he business co | ontact infor | mation o | of the p | erson b | eing com | pensated. | | | |
| Street address | | | | | | | | | | | | |
| Municipality | | | | | | Pr | rovince | /State | | | | |
| Country | | | | | Po | stal co | ode/Zip | o code | | | | |
| Email address | | | | | Т | Feleph | none ni | umber | | | | |
| c) Relationship to issuer or investment fund manager | | | | | | | | | | | | |
| Indicate the person's relationship with the issuer or investment fund manager (select all that apply). Refer to the meaning of "connected" in Part B(2) of the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. | | | | | | | | | | | | |
| | - | | | | | - | - | | er than an | investmen | t fund) | |
| Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager | | | | | | | | | | | | |
| ✓ None of the above | | | | liagor | | mpioye | | | | | linggol | |
| | | | | | | | | | | | | _ |
| d) Compensation details Provide details of all compensation Canadian dollars. Include cash co incidental to the distribution, suc allocation arrangements with the | ommissions, securitie h as clerical, printing | es-based g, legal o | ' compensatio or accounting | n, gifts, diso services. Ar | counts or n issuer is | [.] other s not re | comper equired | nsation. E to ask foi | o not repo | rt payment | s for services | ! |
| Cash commissions pai | id 2,64 | 40.00 | | | | S | Security | code 1 | Security co | de 2 Sec | curity code 3 | |
| Value of all securities distributed as compensatior | - | | S | Security co | des | ١ | N N | Т | | | | |
| Describe te | erms of warrants, op | tions or | other rights | 52,800 V Exercisa | | | 18 Mon | ths, Exp | piring Dec | ember 6, | 2024, | |
| Other compensation | h ⁵ | | Describe | | | | | | | | | |
| Total compensation pai | d 2,64 | 40.00 | | L | | | | | | | 1 | |
| Check box if the per | son will or may rece | eive any | deferred con | npensation | (describ | e the t | erms be | elow) | | | | |
| | | | | | | | | | | | | |
| ⁴ Provide the aggregate value o additional securities of the issue rights exercisable to acquire ad ⁵ Do not include deferred compe- ⁵ Do | er. Indicate the secu Iditional securities o | irity code | es for all secu | | | | | | | | | |

| a) Name of person com | pensated and registration | on status | | | | | | |
|--|--|-------------------------------------|--|---|---|--|--|--|
| Indicate whether the person co | mpensated is a registrant. | | ✓ No | Yes | | | | |
| If the person compensated is a | n individual, provide the no | ime of the indivi | dual. | | | | | |
| Full legal name of indi | vidual | | | | | | | |
| | Family | / name | First giv | ven name | Secondary given names | | | |
| If the person compensated is n | - | - | | | | | | |
| Full legal name | e of non-individual Bua | Capital Mana | gement Ltd. | | | | | |
| F | Firm NRD number | | | (if app | licable) | | | |
| Indicate whether the person co | mpensated facilitated the c | listribution throu | igh a funding portal o | or an internet-based | portal. 🗸 No 🗌 Yes | | | |
| b) Business contact info | rmation | | | | | | | |
| If a firm NRD number is not pr | ovided in Item 8 (a), provid | e the business co | ontact information of | the person being con | npensated. | | | |
| Street address | 908-510 Burrard St | | | | | | | |
| Municipality | Vancouver | | | Province/State | British Columbia | | | |
| Country | Canada | | Pos | stal code/Zip code | V6C 3A8 | | | |
| Email address | | | T T | elephone number | | | | |
| c) Relationship to issuer or investment fund manager | | | | | | | | |
| | | | | | aning of "connected" in Part B(2) of | | | |
| | the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) | | | | | | | |
| | | - | | · | | | | |
| Director or officer of | the investment fund or inve | estment fund ma | anager 🔄 Err | ployee of the issuer | or investment fund manager | | | |
| ✓ None of the above | | | | | | | | |
| d) Compensation details | ; | | | | | | | |
| Canadian dollars. Include cash | commissions, securities-bas uch as clerical, printing, lege | sed compensatio al or accounting | n, gifts, discounts or o services. An issuer is | other compensation. not required to ask fo | stribution. Provide all amounts in Do not report payments for services or details about, or report on, internal | | | |
| Cash commissions p | aid 2,000.00 |) | | Security code 1 | Security code 2 Security code 3 | | | |
| Value of all securiti distributed as compensation | | | Security codes | W N T | | | | |
| | terms of warrants, options | or other rights | 40,000 Warrants Exercisable @ \$ | | piring December 6, 2024, | | | |
| Other compensation | on⁵ | Describe | | 0.00 | | | | |
| Total compensation pa | | | | | | | | |
| Check box if the pe | erson will or may receive a | | pensation (describe | e the terms below) | | | | |
| | | - | | | | | | |
| ⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp | uer. Indicate the security c additional securities of the l | odes for all secu | | | ights exercisable to acquire ding options, warrants or other | | | |

| a) Name of person comp | pensated and registra | tion status | | | | | | |
|--|---|---------------------|-------------------------------|----------------|---------------|-----------------|------------------------|--|
| Indicate whether the person co | mpensated is a registran | t. | ✓ No | Yes | S | | | |
| If the person compensated is a | - | name of the indivi | dual. | | | | | |
| Full legal name of indiv | vidual Buick | | Jonathan | | | | | |
| | Fan | nily name | Fire | st given name | | Second | ary given names | |
| If the person compensated is n | ot an individual, provide | the following infor | mation. | | | | | |
| Full legal name | of non-individual | | | | | | | |
| F | Firm NRD number | | | | (if appl | icable) | | |
| Indicate whether the person compensated facilitated the distribution through a funding portal or an internet-based portal. Ves | | | | | | | | |
| b) Business contact info | rmation | | | | | | | |
| If a firm NRD number is not pr | ovided in Item 8 (a), prov | ide the business co | ontact informatio | n of the perso | on being com | pensated. | | |
| Street address | 2704-401 Bay St | | | | | | | |
| Municipality | Toronto | | | Provi | nce/State | Ontario | | |
| Country | Canada | | | Postal code | /Zip code | M5H 2Y4 | | |
| Email address | | | | Telephon | e number | | | |
| c) Relationship to issuer or investment fund manager | | | | | | | | |
| Indicate the person's relationsh | | | | | | ning of "conn | ected" in Part B(2) of | |
| the Instructions and the meaning | - | | or the purposes o | | | an the section | | |
| Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) | | | | | | | | |
| Director or officer of t | Director or officer of the investment fund or investment fund manager Employee of the issuer or investment fund manager | | | | | | | |
| ✓ None of the above | | | | | | | | |
| d) Compensation details | 3 | | | | | | | |
| Provide details of all compensation Canadian dollars. Include cash incidental to the distribution, su | commissions, securities-l | oased compensatio | n, gifts, discounts | s or other con | npensation. D | Do not report p | payments for services | |
| allocation arrangements with th | | | | | | | , | |
| Cash commissions pa | aid 3,200. | 00 | | Secu | rity code 1 | Security code | 2 Security code 3 | |
| Value of all securitie distributed as compensation | | | Security codes | W | N T | | | |
| Describe | terms of warrants, optio | ns or other rights | 64,000 Warra Exercisable @ | | /lonths, Exp | oiring Decer | nber 6, 2024 | |
| Other compensation | n⁵ | Describe | | | | | | |
| Total compensation pa | aid 3,200. | 00 | | | | |] | |
| Check box if the pe | erson will or may receive | any deferred con | pensation (desc | ribe the term | s below) | | | |
| | | | | | | | | |
| ⁴ Provide the aggregate value additional securities of the iss rights exercisable to acquire a ⁵ Do not include deferred comp | uer. Indicate the security additional securities of th | codes for all secu | | | | | | |

| a) Name of person comp | pensated and regist | ration status | | | | | | |
|---|---|---|---|--------------------------------------|-------------------------------|---|--|--|
| Indicate whether the person co | mpensated is a registre | ant. | ✓ No | 🗌 Yes | | | | |
| If the person compensated is ar | n individual, provide th | e name of the individ | dual. | | | | | |
| Full legal name of indiv | /idual | | | | | | | |
| | F | amily name | Fir | st given name | I | Secondary given names | | |
| If the person compensated is no | ot an individual, provid | le the following inform | mation. | | | | | |
| Full legal name | of non-individual | Simone Capital Co | orp. | | | | | |
| F | irm NRD number | | | | (if appli | icable) | | |
| Indicate whether the person co | mpensated facilitated | the distribution throu | igh a funding poi | rtal or an inter | net-based p | ortal. 🖌 No 🗌 Yes | | |
| b) Business contact infor | rmation | | | | | | | |
| If a firm NRD number is not pro | ovided in Item 8 (a), pr | ovide the business co | ontact informatio | n of the persor | n being com | pensated. | | |
| Street address | 77 King Street Wes | st, Suite 1179 | | | | | | |
| Municipality | Toronto | | | Provin | ce/State | Ontario | | |
| Country | Canada | | | Postal code/2 | Zip code | M5K 1P2 | | |
| Email address | | | | Telephone | number | | | |
| c) Relationship to issuer or investment fund manager | | | | | | | | |
| | | | | | | ning of "connected" in Part B(2) of | | |
| the Instructions and the meaning of "control" in section 1.4 of NI 45-106 for the purposes of completing this section. | | | | | | | | |
| Connect with the issuer or investment fund manager Insider of the issuer (other than an investment fund) | | | | | | | | |
| Director or officer of t | he investment fund o | investment fund ma | anager | Employee of | the issuer c | or investment fund manager | | |
| ✓ None of the above | | | | | | | | |
| d) Compensation details | i de la companya de l | | | | | | | |
| Canadian dollars. Include cash o | commissions, securitie ch as clerical, printing | s-based compensation , legal or accounting | n, gifts, discounts services. An issue | s or other comp er is not require | pensation. D ed to ask for | tribution. Provide all amounts in Do not report payments for services r details about, or report on, internal | | |
| Cash commissions pa | aid 40 | 0.00 | | Securi | ity code 1 | Security code 2 Security code 3 | | |
| Value of all securitie distributed as compensatio | | s | Security codes | W | N T | | | |
| | terms of warrants, opt | ions or other rights | 8,000 Warrar Exercisable @ | | nths, Expi | ring December 6, 2024 | | |
| Other compensatio | n ⁵ | Describe | | <u>له</u> ۵۵.06 | | | | |
| Total compensation pa | | 0.00 | | | | | | |
| Check box if the pe | erson will or may recei | ve any deferred corr | pensation (desc | cribe the terms | below) | | | |
| | | | | | | | | |
| ⁴ Provide the aggregate value o additional securities of the issu rights exercisable to acquire a ⁵ Do not include deferred comp | uer. Indicate the secu additional securities of | rity codes for all secu | | | | | | |

| TEM 9 - DIRECTORS, EXECUTIVE OFFICERS AND PROMOTERS OF THE ISSUER | | | | | | | | | | |
|--|------------------------|-----------------------|--------------------------|---|-----------------------|----------|--------------------------|----|--|--|
| If the issuer is an investment fund, do not complete Item 9. Procced to Item 10. | | | | | | | | | | |
| Indicate whether the issuer is any o | f the following (seled | ct the one that appli | es - if more than one | applies, select onl | y one). | | | | | |
| Reporting issuer in any juris | sdiction of Canada | | | | | | | | | |
| Foreign public issuer | | | | | | | | | | |
| Wholly owned subsidiary of a reporting issuer in any jurisdiction of Canada ⁶ | | | | | | | | | | |
| Provide name of reporting issuer | | | | | | | | | | |
| Wholly owned subsidiary of a foreign public issuer ⁶ | | | | | | | | | | |
| Provide name of foreign public issuer | | | | | | | | | | |
| Issuer distributing only eligi | ble foreign securitie | s and the distributio | n is to permitted clie | ents only ⁷ | | | | | | |
| If the issuer is at least one of the | above, do not com | plete Item 9(a) – (| c). Proceed to Item | 10. | | | | | | |
| ⁶ An issuer is a wholly owned subsidiary of a reporting issuer or a foreign public issuer if all of the issuer's outstanding voting securities, other than securities that are required by law to be owned by its directors, are beneficially owned by the reporting issuer or the foreign public issuer, respectively. ⁷ Check this box if it applies to the current distribution even if the issuer made previous distributions of other types of securities to non-permitted clients. Refer to the definitions of "eligible foreign security" and "permitted client" in Part B(1) of the Instructions. If the issuer is none of the above, check this box and complete Item 9(a) - (c). | | | | | | | | | | |
| a) Directors, executive officers and promoters of the issuer | | | | | | | | | | |
| Provide the following information for territory; otherwise state the country. | | | | | | tate the | province | or | | |
| Organization or company name | Family name | First given name | Secondary given names | Business loc non-individu resident jurisdictio individu | ual or ail n of | | onship to ct all that | | | |
| | | | | Province or | country | D | 0 | Р | | |
| | | | | | | | | | | |
| b) Promoter information | | | | | | | | | | |
| If the promoter listed above is not ar within Canada, state the province or | | | | | | | | | | |
| Organization or company name | Family name | First given name | Secondary given names | Residential jurisdiction of individual | Rela (select c | | to promo oth if app | | | |
| | | | | Province or | D | | 0 | | | |
| | | | | country | | | | | | |
| | | | | country | | | | | | |

Complete Schedule 2 of this form providing the full residential address for each individual listed in Item 9(a) and (b) and attach to the completed report. Schedule 2 also requires information to be provided about control persons.

ITEM 10 - CERTIFICATION

Provide the following certification and business contact information of an officer, director or agent of the issuer or underwriter. If the issuer or underwriter is not a company, an individual who performs functions similar to that of a director or officer may certify the report. For example, if the issuer is a trust, the report may be certified by the issuer's trustee. If the issuer is an investment fund, a director or officer of the investment fund manager (or, if the investment fund manager is not a company, an individual who performs similar functions) may certify the report if the director or officer has been authorized to do so by the investment fund.

The certification may be delegated, but only to an agent that has been authorized by an officer or director of the issuer or underwriter to prepare and certify the report on behalf of the issuer or underwriter. If the report is being certified by an agent on behalf of the issuer or underwriter, provide the applicable information for the agent in the boxes below.

If the individual completing and filing the report is different from the individual certifying the report, provide the name and contact details for the individual completing and filing the report in Item 11.

The signature on the report must be in typed form rather than handwritten form. The report may include an electronic signature provided the name of the signatory is also in typed form.

Securities legislation requires an issuer or underwriter that makes a distribution of securities under certain prospectus exemptions to file a completed report of exemt distribution.

By completing the information below, I certify, on behalf of the issuer/underwriter/investment fund manager, to the securities regulatory authority or regulator, as applicable, that I have reviewed this report and to my knowledge, having exercised reasonable diligence, the information provided in this report is true and, to the extent required, complete.

| Name of issuer/underwriter/ investment fund manager/agent | Big Gold Inc. | | | | | | | | |
|--|---------------------|---------------------|-----------------------|---------|----------|--|--|--|--|
| Full legal name | Benbouazza | enbouazza Wafae | | | | | | | |
| | Family name | | Secondary given names | | | | | | |
| Title | Corporate Secretary | Corporate Secretary | | | | | | | |
| Telephone number | 6473676201 | Email address | wafae@v | enexcap | ital.com | | | | |
| Signature | Wafae Benbouazza | 2023 | 07 | 06 | | | | | |
| | | | YYYY | MM | DD | | | | |

ITEM 11- CONTACT PERSON

Provide the following business contact information for the individual that the securities regulatory authority or regulator may contact with any questions regarding the contents of this report, if different than the individual certifying the report in Item 10.

Same as individual certifying the report

| Full legal name | Mitchell | Anne | | | Title | Manager, Issuer Services |
|------------------|-------------------------|------------------|---------------|-------------|---------|-----------------------------|
| | Family name | First given name | e Secondary | given names | | |
| Name of company | Grove Corporate Service | es | | | | |
| Telephone number | 4166421807 | | Email address | anne@grove | corp.ca | |

Notice - Collection and use of personal information

The personal information required under this form is collected on behalf of and used by the securities regulatory authority or regulator under the authority granted in securities legislation for the purposes of the administration and enforcement of the securities legislation.

If you have any questions about the collection and use of this information, contact the securities regulatory authority or regulator in the local jurisdiction(s) where the report is filed, at the address(es) listed at the end of this form.

The attached Schedules 1 and 2 may contain personal information of individuals and details of the distribution(s). The information in Schedules 1 and 2 will not be placed on the public file of any securities regulatory authority or regulator. However, freedom of information legislation may require the securities regulatory authority or regulator to make this information available if requested.

By signing this report, the issuer/underwriter confirms that each individual listed in Schedule 1 or 2 of the report who is resident in a jurisdiction of Canada:

- a) has been notified by the issuer/underwriter of the delivery to the securities regulatory authority or regulator of the information
 pertaining to the individual as set out in Schedules 1 or 2, that this information is being collected by the securities regulatory
 authority or regulator under the authority granted in securities legislation, that this information is being collected for the purposes of
 the administration and enforcement of the securities legislation of the local jurisdiction, and of the title, business address and
 business telephone number of the public official in the local jurisdiction, as set out in this form, who can answer questions about the
 security regulatory authority's or regulator's indirect collection of the information, and
- b) has authorized the indirect collection of the information by the securities regulatory authority or regulator.